



GOVERNMENT OF BIHAR
DEPARTMENT OF MEDICAL AND HEALTH
PRIMARY HEALTH CENTRE BIKRAM

FORM5



BIRTH CERTIFICATE

(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE BIHAR REGISTRATION OF BIRTHS & DEATHS RULES 2002)

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR PRIMARY HEALTH CENTRE BIKRAM OF TAHSIL/BLOCK BIKRAM OF DISTRICT PATNA OF STATE/UNION TERRITORY BIHAR, INDIA.

NAME: RAVINDR KUMAR

SEX: MALE

AADHAAR NUMBER: XXXX-XXXX-3047

DATE OF BIRTH:

01-01-1986

ONE -JANUARY-ONE THOUSAND NINE HUNDRED AND EIGHTY SIX

PLACE OF BIRTH:

PRIMARY HEALTH CENTER BIKRAM

NAME OF MOTHER:

MANTI DEVI

NAME OF FATHER:

LALBABU YADAV

AADHAAR NUMBER OF MOTHER:

AADHAAR NUMBER OF FATHER:

ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

VILL KELHANPUR POST BINDAUL PS BIHTA PATNA BIHAR 801112

PERMANENT ADDRESS OF PARENTS:

VILL KELHANPUR POST BINDAUL PS BIHTA PATNA BIHAR 801112

REGISTRATION NUMBER:

B202490347001048

DATE OF REGISTRATION:

10-06-2024

REMARKS (IF ANY):

DATE OF ISSUE:

10-06-2024

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'This QR code can be used to check the authenticity of the certificate'

SIGNATURE OF ISSUING AUTHORITY :

Registrar (BIRTH & DEATH)

PRIMARY HEALTH CENTRE BIKRAM

"ENSURE REGISTRATION OF EVERY BIRTH AND DEATH"